U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Fallure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 5/6-4/19	2. Fiscal Year Covered From:
2308	[] / [04] Through: [12] 30 / [04]
Name and address of person filing.	Name, file number, and address of labor organization.
Name CLETUS E HOERCHER	Name SERVICE EMPLOYERS LOCAL 116
Securitarian (Securitaria de Caracteria de C	Labor Organization File Number 516-483
P.O. Box, Bldg., Room No., If any	P.O. Box, Building and Room Number, if any NOUs
Street 1929 EAS+ "D" S+.	Street 1828 East 10" St.
City Belleville	City Belleville
State	1 State ILUdois ZIP Code +4 62M
Position in labor organization.	us/
Name and address of Employer (including trade name, if any). Name Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street	
City	173 600 601
State ZIP Code + 4	
	Signature Material Thousand
submitted in this report (including the information contained in any accountersigned's knowledge and belief, true, correct, and complete. (See	Signature Signature Signature The law, that all of the information ompanying documents), has been examined by the signatory and is, to the best of the other section on penalties in the instructions.)
submitted in this report (including the information contained in any acco	nalty of Perjury and other applicable penalties of the law, that all of the information ompenving documents), has been examined by the signatory and is, to the best of the